<i>_</i>	PATE	NT APPLICA Eff	TION FE	E DETERMIN cember 8, 200	IATION REC	OR	D	(1)9		11/	149	
	CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN											104h
	TOTAL CLAI	4	TYPE		•	OR SMA	LL ENTITY	1 2				
	FOR NUMBER FILED NUMBER EXTRA						TAR		E	FAT		┪.
	OTAL CHARGEARIE CLAUME					4	BASIC	EE		BASIC	FEE	7
Il	NDEPENDENT CLAIMS minus 3 =						X\$ 25	=	X	OR X\$50	=	1
1	ULTIPLE DEPENDENT CLAIM PRESENT						X100:	.] /	c	N X200	1	1
ŀ	If the differen	ice in column 1	is less than	7010 0010 105	+180		·	R +360:		1		
*If the difference in column 1 is less than zero, enter *0" in column 2 TOTAL OR +360= TOTAL OR TOTAL OR TOTAL OTHER THAN CLAIMS CLAIMS CLAIMS HIGHEST OR HIGHEST OR SMALL ENTITY OR SMALL ENTITY											! .	
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Ş	Total	. 30	Minus	PAID FOR	-	l I		FEE	-		FEE	·
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2		CLAIMS REMAINING AFTER		(Column 2) HIGHEST NUMBER PREVIOUSLY	(Column 3)	Γ		ADDI-	ſ		ADDI-	
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